

POSITION	ID NO.	DATE
CLASSIFIER	21	12/8/93
EXAMINER	434	12/11/93
TYPIST	335	12/15/93
VERIFIER	0346	12/15/93
CORPS CORR.		
SPEC. HAND		
FILE MAINT.		
DRAFTING		

INDEX OF CLAIMS

Claim	Date
Final	
Original	
1	9/24
2	9/24
3	9/24
4	9/24
5	9/24
6	9/24
7	9/24
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50	9/24

Claim	Date
Final	
Original	
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SYMBOLS

- ✓ Rejected
- Allowed
- (Through numeral) Canceled
- + Restricted
- N Non-elected
- I Interference
- A Appeal
- O Objected